



**APRIL 2005 MONTHLY REPORT**  
**(Updated February 2006)**

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
MONTHLY STATISTICS FOR APRIL 2005 MONTH END  
EXECUTIVE SUMMARY**

	April 2005*	October 2004
<b>Bank Summary</b>		
Checkwrite	\$3,825,614.59	\$8,255,178.23
Book Balance(US Bank & State General Account)	\$57,009,607.00	\$53,382,423.00
<b>Enrollment</b>		
Plan 1A	7,755	8,189
Plan 1B	9,319	8,542
Plan 2	1,701	1,737
Total	18,775	18,468
New Applications Received	585	
<b>Claims</b>		
Claims Processed	82,366	138,191
Average Processing Days	20.12	16
Claim Inventory - Over 30 Days Old	5,606	1,813
Claim Inventory - Total	24,441	12,910
Claims Denied(NonPBM)	4,930	11,645
Claims Denied(PBM)	25,472	13,104
Claim Accuracy Performance	99.49%	100.00%
<b>Customer Service/Policyholder Services</b>		
Number of Calls Received	18,245	12,889
Percentage of Calls Answered	98.40%	87.00%
Written Correspondence - Received	826	834
Written Correspondence - Completed	327	841
Written Correspondence - Inventory	502	18
Average Hold Time for Telephone Calls	0.3	4.79

**\*Please note: Due to the transition of HIRSP plan administration services to a new contractor effective April 1, 2005 claims volumes, payments and other operational statistics may be accounted for differently. Care should be used when trying to compare data from prior to April 1, 2005 to data from April 1, 2005 going forward.**

**Also note that adjustments as reported by the previous administrator are no longer being counted in reports found on pages 26, 27 and 28 beginning with April 2005 data.**

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
APRIL 2005 MONTHLY REPORT  
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**Wisconsin Health Insurance Risk-Sharing Plan**  
**Breakdown of Incurred Claims and Earned Premium**  
**by Quarter and Plan**

<b>3Q03</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$20,375,143	\$10,846,522	187.8%	\$799.53	\$425.62
Plan 1B	7,436,020	7,649,161	97.2%	356.20	366.41
Plan 2	4,248,287	2,062,401	206.0%	816.66	396.46
Total	\$32,059,450	\$20,558,083	155.9%	\$621.77	\$398.71
<b>4Q03</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,644,063	\$10,825,220	209.2%	\$889.96	\$425.45
Plan 1B	9,584,810	8,013,666	119.6%	436.21	364.71
Plan 2	4,489,406	2,062,818	217.6%	861.86	396.01
Total	\$36,718,279	\$20,901,704	175.7%	\$697.72	\$397.17
<b>1Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$19,671,524	\$10,273,986	191.5%	\$801.68	\$418.70
Plan 1B	9,750,553	8,769,984	111.2%	405.29	364.54
Plan 2	4,014,558	2,060,924	194.8%	768.04	394.28
Total	\$33,436,635	\$21,104,894	158.4%	\$621.23	\$392.12
<b>2Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,817,981	\$10,446,926	208.8%	\$871.60	\$417.34
Plan 1B	11,121,952	9,078,492	122.5%	446.38	364.36
Plan 2	4,879,335	2,092,994	233.1%	928.16	398.13
Total	\$37,819,268	\$21,618,413	174.9%	\$685.07	\$391.60
<b>3Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,311,378	\$11,627,516	183.3%	\$860.09	\$469.27
Plan 1B	11,393,181	10,348,024	110.1%	448.55	407.40
Plan 2	4,920,084	2,438,376	201.8%	947.26	469.46
Total	\$37,624,643	\$24,413,917	154.1%	\$679.49	\$440.91
<b>4Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$25,082,531	\$11,459,604	218.9%	\$1,023.86	\$467.78
Plan 1B	14,538,749	10,461,572	139.0%	565.45	406.88
Plan 2	5,311,264	2,436,761	218.0%	1,025.34	470.42
Total	\$44,932,545	\$24,357,937	184.5%	\$811.20	\$439.75

**NOTES:**

Loss Ratio = Incurred Claims / Earned Premiums

Earned Premium includes Premium Subsidies

Incurred Claims include Provider Contributions

Administrative Expenses are not included in this exhibit

Incurred Claims and Earned Premiums are updated quarterly and restated to reflect the most current information available as of March 31, 2005

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
Financial Report Notes  
For the Period Ending April 30, 2005**

The financial statement values for January-November 2004 in this April Monthly Report have been restated from those found in prior monthly reports. The restatements are due to a HIRSP Board of Governors decision to revise HIRSP's definition of program costs. The definition of program costs that HIRSP has been using since 1998 was based on billed charges less a fixed percentage discount for medical (non-pharmacy) services. The discounts vary by service category and the percentages have not changed since 1998.

Due to rising costs in the HIRSP program, the Board adopted a change in the discounts from roughly an aggregate discount of 20% to an aggregate discount of 30%. As a result, the HIRSP U&C was reduced by a multiple of 0.875  $(1-0.30)/(1-0.20)$ . This change was made retroactively to January 1, 2004. This change is meant to continue through June 30, 2005 when a new methodology for determining future program costs will be implemented.

The following table shows calendar year 2004 under the original basis, the revised basis, and the resulting changes:

<b>HIRSP Summary Impact of Program Changes</b>			
	<b>Original Basis</b>	<b>Revised Basis</b>	<b>Resulting Changes</b>
Total Operating Expenses	\$174,246,511	\$157,076,768	(\$17,169,743)
Required Shares			
Policyholders	\$102,883,919	\$92,582,076	(\$10,301,843)
Providers	36,759,562	33,325,612	(3,433,950)
Insurers	36,759,557	33,325,607	(3,433,950)
Ending Balances			
Policyholders	(\$653,169)	\$9,648,674	\$10,301,843
Providers	12,698,909	(1,036,887)	(13,735,796)
Insurers	1,517,534	4,951,484	3,433,950

The motions adopted by the Board regarding the changes summarized above are as follows:

- 1) Effective January 1, 2004 through June 30, 2005, program costs are to be defined such that the HIRSP medical U&C is 87.5% of the current percentages.
- 2) Convene the Actuarial Advisory Subcommittee for the purpose of advising the FOC and Board regarding a market-based benchmark for program costs for use in establishing the SFY06 Budget.
- 3) The Board acknowledges that the current problem of the growing provider contribution and program costs is a function of several factors including increasing provider charges and provider payment rates not keeping pace with inflation. The Board acknowledges that the above referenced motion is an interim solution and would have recommended a 5% provider payment increase effective March 1, 2005 if not for administrative issues associated with the April 1, 2005 transition of plan administrators. The Board will reduce the SFY06 provider surplus by \$1.5 million to compensate for not changing the provider payment rate effective April 1, 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
Financial Report Notes  
For the Period Ending April 30, 2005**

These monthly reports do not include the June 30, 2002 CAFR<sup>1</sup> (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

- 1) **Policyholder Retained Earnings, End of Period (page 3 & 9)**  
The policyholder retained earnings include both assigned and unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown)
- 2) **Other Receivables (page 7 & 13)**  
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.
- 3) **Losses Paid or Approved for Payment (page 3 & 9)**  
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

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<sup>1</sup> CAFR is the State of Wisconsin annual financial report published by DOA (Dept. of Admin.) and prepared in accordance with GASB (Governmental Accounting Standards Board).

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
for the Period Ended April 30, 2005 (July - November Restated)  
Fiscal Year 2005**

**Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings**

<b>Operating Revenues</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Year to Date</b>
Gross Premiums	7,872,385	8,059,267	8,197,318	8,098,529	7,994,788	8,143,915	8,239,786	8,033,854	8,203,838	8,038,869	-	-	80,882,549
Premium Subsidized	(332,487)	(337,487)	(355,614)	(355,279)	(358,351)	(359,019)	(354,700)	(328,871)	(306,815)	(348,067)	-	-	(3,436,690)
Net Premium Revenues	7,539,898	7,721,780	7,841,704	7,743,250	7,636,437	7,784,896	7,885,086	7,704,983	7,897,023	7,690,802	-	-	77,445,859
Provider Contribution	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	2,372,221	3,005,828	-	-	25,705,991
Insurer Assessments	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	2,716,349	2,716,349	-	-	27,013,568
<b>Total Operating Revenues</b>	<b>13,053,434</b>	<b>12,407,358</b>	<b>13,210,190</b>	<b>12,171,786</b>	<b>13,395,217</b>	<b>13,913,984</b>	<b>12,856,478</b>	<b>12,758,399</b>	<b>12,985,593</b>	<b>13,412,979</b>	-	-	<b>130,165,418</b>
<b>Operating Expenses</b>													
Medical Losses:													
Losses Paid or Approved for Payment <sup>(3)</sup>	9,435,534	7,139,835	5,619,849	10,545,095	8,955,173	12,759,804	8,738,080	8,587,330	6,994,408	5,477,768	-	-	84,252,876
Increase (Decrease) in Unpaid Losses	1,140,327	(11,402)	3,859,488	(3,260,495)	2,212,678	233,998	(1,174,533)	(984,629)	2,012,472	4,796,581	-	-	8,824,485
Deductible Subsidy Paid	56,140	35,944	37,736	60,666	34,034	39,816	59,708	78,706	29,706	53,990	-	-	486,446
Total Medical Losses	10,632,001	7,164,377	9,517,073	7,345,266	11,201,885	13,033,618	7,623,255	7,681,407	9,036,586	10,328,339	-	-	93,563,807
Pharmacy Losses:													
Losses Paid or Approved for Payment <sup>(4)</sup>	3,455,297	5,261,686	3,541,388	3,670,974	3,732,490	3,773,000	3,656,006	3,495,680	5,402,192	4,013,268	-	-	40,001,981
Increase (Decrease) in Unpaid Losses	553,645	(1,412,550)	361,325	268,803	516,342	702,134	(178,275)	116,814	(1,607,836)	139,289	-	-	(540,309)
Drug Rebates	(91,621)	(136,238)	(229,261)	(107,406)	(108,778)	(172,591)	(122,005)	(120,325)	(230,445)	(214,496)	-	-	(1,533,166)
Subsidy - Coinsurance Out-of-Pocket Max	19,025	20,562	20,660	31,667	20,879	21,711	12,515	12,515	(8,892)	12,663	-	-	163,305
Total Pharmacy Losses	3,936,346	3,733,460	3,694,112	3,864,038	4,160,933	4,324,254	3,368,241	3,504,684	3,555,019	3,950,724	-	-	38,091,811
Total Losses	14,568,347	10,897,837	13,211,185	11,209,304	15,362,818	17,357,872	10,991,496	11,186,091	12,591,605	14,279,063	-	-	131,655,618
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	-	-	-	-	-	-	380,950	-	-	380,950
Navitus Admin Fees	-	-	-	-	-	-	-	-	-	103,263	-	-	103,263
DHFS Admin Fees	38,870	52,788	21,209	22,329	55,715	35,961	23,186	37,147	50,352	18,876	-	-	356,433
EDS Admin Fees	72,709	71,453	76,389	74,342	78,537	75,430	76,867	75,812	74,950	(182)	-	-	676,307
UGS Admin Fees	245,436	239,647	253,435	241,145	241,777	259,593	239,028	241,709	244,304	-	-	-	2,206,074
Milliman USA Actuarial Services	10,500	6,857	8,982	8,103	2,846	16,597	22,888	54,942	25,797	35,041	-	-	192,553
Other Admin Fees	12,075	18,441	28,026	51,993	(28,714)	27,894	18,597	12,287	26,803	3,570	-	-	170,972
Total Administrative Expenses	379,590	389,186	388,041	397,912	350,161	415,475	380,566	421,897	422,206	541,518	-	-	4,086,552
Referral fees	8,785	8,798	7,350	8,575	8,785	9,835	7,035	4,607	7,455	9,380	-	-	80,605
Total Operating Expenses	14,956,722	11,295,821	13,606,576	11,615,791	15,721,764	17,783,182	11,379,097	11,612,595	13,021,266	14,829,961	-	-	135,822,775
<b>Net Operating Income (Loss)</b>	<b>(1,903,288)</b>	<b>1,111,537</b>	<b>(396,386)</b>	<b>555,995</b>	<b>(2,326,547)</b>	<b>(3,869,198)</b>	<b>1,477,381</b>	<b>1,145,804</b>	<b>(35,673)</b>	<b>(1,416,982)</b>	-	-	<b>(5,657,357)</b>
<b>Non-Operating Revenues (Expenses)</b>													
Federal Grant	-	-	-	2,222,903	-	-	-	-	-	-	-	-	2,222,903
Investment income	40,452	39,550	42,044	58,615	63,927	76,234	79,968	67,563	92,323	118,962	-	-	679,638
Total Non-operating Revenues (Expenses)	40,452	39,550	42,044	2,281,518	63,927	76,234	79,968	67,563	92,323	118,962	-	-	2,902,541
<b>Net Income (Loss)</b>	<b>(1,862,836)</b>	<b>1,151,087</b>	<b>(354,342)</b>	<b>2,837,513</b>	<b>(2,262,620)</b>	<b>(3,792,964)</b>	<b>1,557,349</b>	<b>1,213,367</b>	<b>56,650</b>	<b>(1,298,020)</b>	-	-	<b>(2,754,816)</b>
<b>Additions to Retained Earnings</b>													
<b>Policyholder</b>													
Retained Earnings, Beginning of Period	10,106,007	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	-	-	10,106,007
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(957,113)	1,395,914	152,032	2,645,698	(1,312,053)	(2,381,811)	1,575,865	1,252,788	479,775	(681,086)	-	-	2,170,009
<b>Retained Earnings, End of Period<sup>(1)</sup></b>	<b>9,148,894</b>	<b>10,544,808</b>	<b>10,696,840</b>	<b>13,342,538</b>	<b>12,030,485</b>	<b>9,648,674</b>	<b>11,224,539</b>	<b>12,477,327</b>	<b>12,957,102</b>	<b>12,276,016</b>	-	-	<b>12,276,016</b>
<b>Providers</b>													
Retained Earnings, Beginning of Period	883,278	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	-	-	883,278
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(349,873)	(442,734)	(231,108)	(335,020)	(259,799)	(301,631)	(203,800)	(163,741)	(373,220)	(130,401)	-	-	(2,791,327)
<b>Retained Earnings, End of Period</b>	<b>533,405</b>	<b>90,671</b>	<b>(140,437)</b>	<b>(475,457)</b>	<b>(735,256)</b>	<b>(1,036,887)</b>	<b>(1,240,687)</b>	<b>(1,404,428)</b>	<b>(1,777,648)</b>	<b>(1,908,049)</b>	-	-	<b>(1,908,049)</b>
<b>Insurers</b>													
Retained Earnings, Beginning of Period	6,459,308	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	-	-	6,459,308
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(480,685)	254,413	(216,870)	619,168	(635,855)	(1,047,995)	257,507	215,541	(29,091)	(419,880)	-	-	(1,483,747)
<b>Retained Earnings, End of Period</b>	<b>5,978,623</b>	<b>6,233,036</b>	<b>6,016,166</b>	<b>6,635,334</b>	<b>5,999,479</b>	<b>4,951,484</b>	<b>5,208,991</b>	<b>5,424,532</b>	<b>5,395,441</b>	<b>4,975,561</b>	-	-	<b>4,975,561</b>
<b>Unfunded Deductible and Coinsurance Subsidy</b>													
Retained Earnings, Beginning of Period	(223,692)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	-	-	(223,692)
Current Earnings	(75,165)	(56,506)	(58,396)	(92,333)	(54,913)	(61,527)	(72,223)	(91,221)	(20,814)	(66,653)	-	-	(649,751)
<b>Retained Earnings, End of Period</b>	<b>(298,857)</b>	<b>(355,363)</b>	<b>(413,759)</b>	<b>(506,092)</b>	<b>(561,005)</b>	<b>(622,532)</b>	<b>(694,755)</b>	<b>(785,976)</b>	<b>(806,790)</b>	<b>(873,443)</b>	-	-	<b>(873,443)</b>
<b>Total Retained Earnings</b>	<b>15,362,065</b>	<b>16,513,152</b>	<b>16,158,810</b>	<b>18,996,323</b>	<b>16,733,703</b>	<b>12,940,739</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	-	-	<b>14,470,085</b>

**Note: Due to the Board decision to change the definition of program cost on a retrospective basis, various components for July-November 2004 will not match those found in prior monthly reports. Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
2005 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES  
AS OF APRIL 2005**

MISC REVENUE	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC REVENUE</b>	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	9,875.07	16,390.65	26,325.77	50,293.38	(30,413.90)	25,518.78	16,896.89	10,586.78	25,102.79				150,576.21
LAB Audit Fee	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	2,900.00			18,200.00
Speed Scribe													-
UW Extension													-
NASCHIP	500.00	350.00											850.00
Legal Services													-
Prest & Assoc-Ind Med Review						675.00							675.00
Independent Review										600.00			600.00
Premium Refund Overdraft Fees										70.00			70.00
													-
													-
													-
													-
<b>TOTAL MISC ADMIN EXP</b>	<b>12,075.07</b>	<b>18,440.65</b>	<b>28,025.77</b>	<b>51,993.38</b>	<b>(28,713.90)</b>	<b>27,893.78</b>	<b>18,596.89</b>	<b>12,286.78</b>	<b>26,802.79</b>	<b>3,570.00</b>	-	-	<b>170,971.21</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



**Wisconsin Health Insurance Risk Sharing Plan  
Fiscal Year 2005 Interim Reconciliation  
As Of April 30, 2005 (July - November Restated)**

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
<b>1. Operating and Administrative Costs under s.149.143(1)</b>													
Medical Losses Paid or Approved for Payment	9,435,534	7,139,835	5,619,849	10,545,095	8,955,173	12,759,804	8,738,080	8,587,330	6,994,408	5,477,768	-	-	84,252,876
Increase (Decrease) in Unpaid Medical Losses	1,140,327	(11,402)	3,859,488	(3,260,495)	2,212,678	233,998	(1,174,533)	(984,629)	2,012,472	4,796,581	-	-	8,824,485
Pharmacy Losses Paid or Approved for Payment	3,455,297	5,261,686	3,541,388	3,670,974	3,732,490	3,773,000	3,656,006	3,495,680	5,402,192	4,013,268	-	-	40,001,981
Increase (Decrease) in Unpaid Pharmacy Losses	553,645	(1,412,550)	361,325	268,803	516,342	702,134	(178,275)	116,814	(1,607,836)	139,289	-	-	(540,309)
Drug Rebates	(91,621)	(136,238)	(229,261)	(107,406)	(108,778)	(172,591)	(122,005)	(120,325)	(230,445)	(214,496)	-	-	(1,533,166)
Total Administrative Expenses	388,375	397,984	395,391	406,487	358,946	425,310	387,601	426,504	429,661	550,898	-	-	4,167,157
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	14,881,557	11,239,315	13,548,180	11,523,458	15,666,851	17,721,655	11,306,874	11,521,374	13,000,452	14,763,308	-	-	135,173,024
<b>2. Adjustments to Operating and Administrative Costs</b>													
Total Non-operating Revenue (Expense)	40,452	39,550	42,044	2,281,518	63,927	76,234	79,968	67,563	92,323	118,962	-	-	2,902,541
<b>3. Total Fiscal Year Program Costs to be Split 60% 20% 20%</b>	14,841,105	11,199,765	13,506,136	9,241,940	15,602,924	17,645,421	11,226,906	11,453,811	12,908,129	14,644,346	-	-	132,270,483
<b>4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)</b>													
Funding Shares													
60% Policyholders	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	7,744,877	8,786,608	-	-	79,362,291
20% Providers	2,968,221	2,239,953	2,701,227	1,848,388	3,120,585	3,529,084	2,245,381	2,290,762	2,581,626	2,928,869	-	-	26,454,096
20% Insurers	2,968,221	2,239,953	2,701,227	1,848,388	3,120,585	3,529,084	2,245,381	2,290,762	2,581,626	2,928,869	-	-	26,454,096
<b>5. Subsidy Funding Shares</b>													
Premium subsidies	332,487	337,487	355,614	355,279	358,351	359,019	354,700	328,871	306,815	348,067	-	-	3,436,690
Deductible Subsidies	56,140	35,944	37,736	60,666	34,034	39,816	59,708	78,706	29,706	53,990	-	-	486,446
Subsidy - coinsurance out-of-pocket Max	19,025	20,562	20,660	31,667	20,879	21,711	12,515	12,515	(8,892)	12,663	-	-	163,305
Total Subsidies	407,652	393,993	414,010	447,612	413,264	420,546	426,923	420,092	327,629	414,720	-	-	4,086,441
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	203,826	196,997	207,005	223,806	206,632	210,273	213,462	210,046	163,815	207,360	-	-	2,043,222
Insurers	203,826	196,996	207,005	223,806	206,632	210,273	213,461	210,046	163,814	207,360	-	-	2,043,219
<b>6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)</b>													
Policyholders	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	7,744,877	8,786,608	-	-	79,362,291
Providers	3,172,047	2,436,950	2,908,232	2,072,194	3,327,217	3,739,357	2,458,843	2,500,808	2,745,441	3,136,229	-	-	28,497,318
Insurers	3,172,047	2,436,949	2,908,232	2,072,194	3,327,217	3,739,357	2,458,842	2,500,808	2,745,440	3,136,229	-	-	28,497,315
<b>7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)</b>													
Policyholders													
Premium	7,539,898	7,721,780	7,841,704	7,743,250	7,636,437	7,784,896	7,885,086	7,704,983	7,897,023	7,690,802	-	-	77,445,859
Premium and Deductible Subsidies Credited to Policyholders	407,652	393,993	414,010	447,612	413,264	420,546	426,923	420,092	327,629	414,720	-	-	4,086,441
Subtotal	7,947,550	8,115,773	8,255,714	8,190,862	8,049,701	8,205,442	8,312,009	8,125,075	8,224,652	8,105,522	-	-	81,532,300
Providers	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	2,372,221	3,005,828	-	-	25,705,991
Insurers	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	2,716,349	2,716,349	-	-	27,013,568
Total	13,461,086	12,801,351	13,624,200	12,619,398	13,808,481	14,334,530	13,283,401	13,178,491	13,313,222	13,827,699	-	-	134,251,859

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005**

<b>Policyholders</b>													
Prior Period Surplus / (Deficit)	10,106,007	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	-	-	10,106,007
Premium (Including Premium and Deductible Subsidies)	7,947,550	8,115,773	8,255,714	8,190,862	8,049,701	8,205,442	8,312,009	8,125,075	8,224,652	8,105,522	-	-	81,532,300
Less Cost	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	7,744,877	8,786,608	-	-	79,362,291
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(957,113)	1,395,914	152,032	2,645,698	(1,312,053)	(2,381,811)	1,575,865	1,252,788	479,775	(681,086)	-	-	2,170,009
Ending Surplus / (Deficit)	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	-	-	12,276,016
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	-	-	12,276,016
<b>Providers</b>													
Prior Period Surplus / (Deficit)	883,278	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	-	-	883,278
Contribution	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	2,372,221	3,005,828	-	-	25,705,991
Less Cost	3,172,047	2,436,950	2,908,232	2,072,194	3,327,217	3,739,357	2,458,843	2,500,808	2,745,441	3,136,229	-	-	28,497,318
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(349,873)	(442,734)	(231,108)	(335,020)	(259,799)	(301,631)	(203,800)	(163,741)	(373,220)	(130,401)	-	-	(2,791,327)
Ending Surplus / (Deficit)	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	-	-	(1,908,049)
<b>Insurers</b>													
Prior Period Surplus / (Deficit)	6,459,308	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	-	-	6,459,308
Assessment	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	2,716,349	2,716,349	-	-	27,013,568
Less Cost	3,172,047	2,436,949	2,908,232	2,072,194	3,327,217	3,739,357	2,458,842	2,500,808	2,745,440	3,136,229	-	-	28,497,315
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(480,685)	254,413	(216,870)	619,168	(635,855)	(1,047,995)	257,507	215,541	(29,091)	(419,880)	-	-	(1,483,747)
Ending Surplus / (Deficit)	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	-	-	4,975,561
<b>Unfunded Deductible and Coinsurance Subsidy</b>													
Prior Period Surplus / (Deficit)	(223,692)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	-	-	(223,692)
Monthly Change	(75,165)	(56,506)	(58,396)	(92,333)	(54,913)	(61,527)	(72,223)	(91,221)	(20,814)	(66,653)	-	-	(649,751)
Ending Surplus / (Deficit)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	-	-	(873,443)
<b>Total HIRSP Retained Earnings</b>													
	15,362,065	16,513,152	16,158,810	18,996,323	16,733,703	12,940,739	14,498,088	15,711,455	15,768,105	14,470,085	-	-	14,470,085

**Note: Due to the Board decision to change the definition of program cost on a retrospective basis, various components for July-November 2004 will not match those found in prior monthly reports. Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan  
April 30, 2005 (July - November Restated)  
Fiscal Year 2005

Unaudited Balance Sheet

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	44,175,497	43,792,481	55,529,616	53,382,423	45,505,246	50,307,256	43,348,568	47,057,865	53,789,891	57,009,607	-	-
Other Receivables <sup>(2)</sup>	39,541	109,277	138,752	200,118	136,931	111,735	96,643	125,560	94,016	1,742,701	-	-
Drug Rebates Receivable	694,465	830,703	1,059,964	1,167,370	1,276,148	1,124,746	1,246,751	1,051,895	1,282,340	1,496,835	-	-
Assessments Receivable	2,781,901	896,397	348,845	742,609	516,473	641,364	3,357,262	94,485	217,131	97,932	-	-
Prepaid Items	57,739	71,349	45,023	34,879	95,293	69,774	52,878	42,291	17,188	1,280	-	-
<b>Total Assets</b>	<b>47,749,143</b>	<b>45,700,207</b>	<b>57,122,200</b>	<b>55,527,399</b>	<b>47,530,091</b>	<b>52,254,875</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,566</b>	<b>60,348,355</b>	-	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical Loss Liabilities	16,129,059	16,120,582	18,992,225	16,540,725	18,210,671	18,388,346	17,498,548	16,751,485	18,285,381	21,908,176	-	-
Unpaid Prescription Drug Loss Liabilities	2,198,353	785,803	1,147,128	1,415,931	1,932,273	2,634,407	2,456,132	2,572,946	965,110	2,584,048	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	-	-
Unearned Premiums	12,626,044	6,831,139	16,957,036	12,608,063	6,784,926	16,833,222	12,599,991	7,023,489	16,764,621	14,630,761	-	-
Unearned Assessments	-	3,966,257	2,604,678	4,463,813	2,605,723	-	2,260	5,010,790	2,537,883	5,432,699	-	-
Accounts Payable and Other Accrued Liabilities	773,622	823,274	602,323	842,544	602,795	798,161	387,083	641,931	419,466	662,586	-	-
<b>Total Liabilities</b>	<b>32,387,078</b>	<b>29,187,055</b>	<b>40,963,390</b>	<b>36,531,076</b>	<b>30,796,388</b>	<b>39,314,136</b>	<b>33,604,014</b>	<b>32,660,641</b>	<b>39,632,461</b>	<b>45,878,270</b>	-	-
Fund Equity:												
Policyholder	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	-	-
Providers	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	-	-
Insurers	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	-	-
Unfunded Deductible and Coinsurance Subsidy	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	-	-
<b>Total Retained Earnings</b>	<b>15,362,065</b>	<b>16,513,152</b>	<b>16,158,810</b>	<b>18,996,323</b>	<b>16,733,703</b>	<b>12,940,739</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	-	-
<b>Total Liabilities and Fund Equity</b>	<b>47,749,143</b>	<b>45,700,207</b>	<b>57,122,200</b>	<b>55,527,399</b>	<b>47,530,091</b>	<b>52,254,875</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,566</b>	<b>60,348,355</b>	-	-

**Note Due to the Board decision to change the definition of program cost on a retrospective basis, the fund equity components for July-November 2004 will not match those found in prior monthly reports. Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
MONTHLY PROVIDER CONTRIBUTION REPORT  
FOR MONTH END APRIL, 2005**

Provider Share Calculation for the Current Month - Claims by Claim Type					
Regular Claims Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Professional	\$ 4,299,049.29	36.0%	\$ 2,751,950.08	\$ 1,729,096.32	\$ 1,022,853.76
Hospital Outpatient	\$ 3,641,869.13	27.5%	\$ 2,641,710.48	\$ 2,250,941.46	\$ 390,769.02
Hospital Inpatient	\$ 1,842,086.74	28.1%	\$ 1,329,162.47	\$ 938,401.87	\$ 390,760.60
Other	\$ 354,749.60	23.9%	\$ 270,320.06	\$ 246,743.37	\$ 23,576.69
Total	\$ 10,137,754.76		\$ 6,993,143.09	\$ 5,165,183.02	\$ 1,827,960.07

Crossover Claims Claim Type	Medicare Allowed Charges	Medicare Paid	HIRSP Paid	HIRSP Deductible/ Coinsurance	Provider Share
Professional	\$ -	\$ -	\$ -	\$ -	\$ -
Hospital Outpatient	\$ -	\$ -	\$ -	\$ -	\$ -
Hospital Inpatient	\$ -	\$ -	\$ -	\$ -	\$ -
Other	\$ -	\$ -	\$ -	\$ -	\$ -
Total	\$ 1,243,104.01	\$ 950,615.36	\$ 198,516.88	\$ 93,910.72	\$ 61.05

Provider Contribution on the Increase(Decrease) in Unpaid Losses	\$ -
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Total Provider Contribution Non-Pharmacy	\$ 1,828,021.12
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Pharmacy Claims Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Prescription Drug not processed by PBM	\$ -	0.0%			\$ -
Prescription Drug processed by PBM	\$ 4,768,521.02	0.0%	\$ 3,547,603.24	\$ 3,547,603.24	\$ -
Total Provider Contribution Pharmacy	\$ 4,768,521.02		\$ 3,547,603.24	\$ 3,547,603.24	\$ -

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
for the Period Ended April 30, 2005  
Calendar Year 2005**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	8,239,786	8,033,854	8,203,838	8,038,869	-	-	-	-	-	-	-	-	32,516,347
Premium Subsidized	(354,700)	(328,871)	(306,815)	(348,067)	-	-	-	-	-	-	-	-	(1,338,453)
Net Premium Revenues	7,885,086	7,704,983	7,897,023	7,690,802	-	-	-	-	-	-	-	-	31,177,894
Provider Contribution	2,255,043	2,337,067	2,372,221	3,005,828	-	-	-	-	-	-	-	-	9,970,159
Insurer Assessments	2,716,349	2,716,349	2,716,349	2,716,349	-	-	-	-	-	-	-	-	10,865,396
Total Operating Revenues	12,856,478	12,758,399	12,985,593	13,412,979	-	-	-	-	-	-	-	-	52,013,449
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment <sup>(3)</sup>	8,738,080	8,587,330	6,994,408	5,477,768	-	-	-	-	-	-	-	-	29,797,586
Increase (Decrease) in Unpaid Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	-	-	-	-	-	-	-	-	4,649,891
Deductible Subsidy Paid	59,708	78,706	29,706	53,990	-	-	-	-	-	-	-	-	222,110
Total Medical Losses	7,623,255	7,681,407	9,036,586	10,328,339	-	-	-	-	-	-	-	-	34,669,587
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	-	-	-	-	-	-	-	-	16,567,146
Increase (Decrease) in Unpaid Losses	(178,275)	116,814	(1,607,836)	139,289	-	-	-	-	-	-	-	-	(1,530,008)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	-	-	-	-	-	-	-	-	(687,271)
Subsidy - Coinsurance Out-of-Pocket Max	12,515	12,515	(8,892)	12,663	-	-	-	-	-	-	-	-	28,801
Total Pharmacy Losses	3,368,241	3,504,684	3,555,019	3,950,724	-	-	-	-	-	-	-	-	14,378,668
Total Losses	10,991,496	11,186,091	12,591,605	14,279,063	-	-	-	-	-	-	-	-	49,048,255
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	380,950	-	-	-	-	-	-	-	-	380,950
Navitus Admin Fees	-	-	-	103,263	-	-	-	-	-	-	-	-	103,263
DHFS Admin Fees	23,186	37,147	50,352	18,876	-	-	-	-	-	-	-	-	129,561
EDS Admin Fees	76,867	75,812	74,950	(182)	-	-	-	-	-	-	-	-	227,447
UGS Admin Fees	239,028	241,709	244,304	-	-	-	-	-	-	-	-	-	725,041
Milliman USA Actuarial Services	22,888	54,942	25,797	35,041	-	-	-	-	-	-	-	-	138,668
Other Admin Fees	18,597	12,287	26,803	3,570	-	-	-	-	-	-	-	-	61,257
Total Administrative Expenses	380,566	421,897	422,206	541,518	-	-	-	-	-	-	-	-	1,766,187
Referral fees	7,035	4,607	7,455	9,380	-	-	-	-	-	-	-	-	28,477
Total Operating Expenses	11,379,097	11,612,595	13,021,266	14,829,961	-	-	-	-	-	-	-	-	50,842,919
Net Operating Income (Loss)	1,477,381	1,145,804	(35,673)	(1,416,982)	-	-	-	-	-	-	-	-	1,170,530
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment income	79,968	67,563	92,323	118,962	-	-	-	-	-	-	-	-	358,816
Total Non-operating Revenues (Expenses)	79,968	67,563	92,323	118,962	-	-	-	-	-	-	-	-	358,816
Net Income (Loss)	1,557,349	1,213,367	56,650	(1,298,020)	-	-	-	-	-	-	-	-	1,529,346
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	9,648,674	11,224,539	12,477,327	12,957,102	-	-	-	-	-	-	-	-	9,648,674
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,575,865	1,252,788	479,775	(681,086)	-	-	-	-	-	-	-	-	2,627,342
Retained Earnings, End of Period <sup>(1)</sup>	11,224,539	12,477,327	12,957,102	12,276,016	-	-	-	-	-	-	-	-	12,276,016
Providers													
Retained Earnings, Beginning of Period	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	-	-	-	-	-	-	-	-	(1,036,887)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(203,800)	(163,741)	(373,220)	(130,401)	-	-	-	-	-	-	-	-	(871,162)
Retained Earnings, End of Period	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	-	-	-	-	-	-	-	-	(1,908,049)
Insurers													
Retained Earnings, Beginning of Period	4,951,484	5,208,991	5,424,532	5,395,441	-	-	-	-	-	-	-	-	4,951,484
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	257,507	215,541	(29,091)	(419,880)	-	-	-	-	-	-	-	-	24,077
Retained Earnings, End of Period	5,208,991	5,424,532	5,395,441	4,975,561	-	-	-	-	-	-	-	-	4,975,561
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(622,532)	(694,755)	(785,976)	(806,790)	-	-	-	-	-	-	-	-	(622,532)
Current Earnings	(72,223)	(91,221)	(20,814)	(66,653)	-	-	-	-	-	-	-	-	(250,911)
Retained Earnings, End of Period	(694,755)	(785,976)	(806,790)	(873,443)	-	-	-	-	-	-	-	-	(873,443)
Total Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	-	-	-	-	-	-	-	-	14,470,085

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**2005 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES**  
**AS OF APRIL 2005**

MISC REVENUE	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC REVENUE</b>	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	16,896.89	10,586.78	25,102.79										52,586.46
LAB Audit Fee	1,700.00	1,700.00	1,700.00	2,900.00									8,000.00
Speed Scribe													-
UW Extension													-
NASCHIP													-
Legal Services													-
Prest & Assoc-Ind Med Review													-
Independent Review				600.00									600.00
Premium Refund Overdraft Fees				70.00									70.00
													-
													-
													-
													-
<b>TOTAL MISC ADMIN EXP</b>	<b>18,596.89</b>	<b>12,286.78</b>	<b>26,802.79</b>	<b>3,570.00</b>	-	-	-	-	-	-	-	-	<b>61,256.46</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
Calendar Year 2005 Interim Reconciliation  
As Of April 30, 2005**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
<b>1. Operating and Administrative Costs under s.149.143(1)</b>													
Medical Losses Paid or Approved for Payment	8,738,080	8,587,330	6,994,408	5,477,768	-	-	-	-	-	-	-	-	29,797,586
Increase (Decrease) in Unpaid Medical Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	-	-	-	-	-	-	-	-	4,649,891
Pharmacy Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	-	-	-	-	-	-	-	-	16,567,146
Increase (Decrease) in Unpaid Pharmacy Losses	(178,275)	116,814	(1,607,836)	139,289	-	-	-	-	-	-	-	-	(1,530,008)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	-	-	-	-	-	-	-	-	(687,271)
Total Administrative Expenses	387,601	426,504	429,661	550,898	-	-	-	-	-	-	-	-	1,794,664
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,306,874	11,521,374	13,000,452	14,763,308	-	-	-	-	-	-	-	-	50,592,008
<b>2. Adjustments to Operating and Administrative Costs</b>													
Total Non-operating Revenue (Expense)	79,968	67,563	92,323	118,962	-	-	-	-	-	-	-	-	358,816
<b>3. Total Fiscal Year Program Costs to be Split 60% 20% 20%</b>	11,226,906	11,453,811	12,908,129	14,644,346	-	-	-	-	-	-	-	-	50,233,192
<b>4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)</b>													
Funding Shares													
60% Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	-	-	-	-	-	-	-	-	30,139,916
20% Providers	2,245,381	2,290,762	2,581,626	2,928,869	-	-	-	-	-	-	-	-	10,046,638
20% Insurers	2,245,381	2,290,762	2,581,626	2,928,869	-	-	-	-	-	-	-	-	10,046,638
<b>5. Subsidy Funding Shares</b>													
Premium subsidies	354,700	328,871	306,815	348,067	-	-	-	-	-	-	-	-	1,338,453
Deductible Subsidies	59,708	78,706	29,706	53,990	-	-	-	-	-	-	-	-	222,110
Subsidy - coinsurance out-of-pocket Max	12,515	12,515	(8,892)	12,663	-	-	-	-	-	-	-	-	28,801
Total Subsidies	426,923	420,092	327,629	414,720	-	-	-	-	-	-	-	-	1,589,364
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	213,462	210,046	163,815	207,360	-	-	-	-	-	-	-	-	794,683
Insurers	213,461	210,046	163,814	207,360	-	-	-	-	-	-	-	-	794,681
<b>6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)</b>													
Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	-	-	-	-	-	-	-	-	30,139,916
Providers	2,458,843	2,500,808	2,745,441	3,136,229	-	-	-	-	-	-	-	-	10,841,321
Insurers	2,458,842	2,500,808	2,745,440	3,136,229	-	-	-	-	-	-	-	-	10,841,319
<b>7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)</b>													
Policyholders													
Premium	7,885,086	7,704,983	7,897,023	7,690,802	-	-	-	-	-	-	-	-	31,177,894
Premium and Deductible Subsidies Credited to Policyholders	426,923	420,092	327,629	414,720	-	-	-	-	-	-	-	-	1,589,364
Subtotal	8,312,009	8,125,075	8,224,652	8,105,522	-	-	-	-	-	-	-	-	32,767,258
Providers	2,255,043	2,337,067	2,372,221	3,005,828	-	-	-	-	-	-	-	-	9,970,159
Insurers	2,716,349	2,716,349	2,716,349	2,716,349	-	-	-	-	-	-	-	-	10,865,396
Total	13,283,401	13,178,491	13,313,222	13,827,699	-	-	-	-	-	-	-	-	53,602,813

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005**

<b>Policyholders</b>													
Prior Period Surplus / (Deficit)	9,648,674	11,224,539	12,477,327	12,957,102	-	-	-	-	-	-	-	-	9,648,674
Premium (Including Premium and Deductible Subsidies)	8,312,009	8,125,075	8,224,652	8,105,522	-	-	-	-	-	-	-	-	32,767,258
Less Cost	6,736,144	6,872,287	7,744,877	8,786,608	-	-	-	-	-	-	-	-	30,139,916
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,575,865	1,252,788	479,775	(681,086)	-	-	-	-	-	-	-	-	2,627,342
Ending Surplus / (Deficit)	11,224,539	12,477,327	12,957,102	12,276,016	-	-	-	-	-	-	-	-	12,276,016
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	11,224,539	12,477,327	12,957,102	12,276,016	-	-	-	-	-	-	-	-	12,276,016
<b>Providers</b>													
Prior Period Surplus / (Deficit)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	-	-	-	-	-	-	-	-	(1,036,887)
Contribution	2,255,043	2,337,067	2,372,221	3,005,828	-	-	-	-	-	-	-	-	9,970,159
Less Cost	2,458,843	2,500,808	2,745,441	3,136,229	-	-	-	-	-	-	-	-	10,841,321
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(203,800)	(163,741)	(373,220)	(130,401)	-	-	-	-	-	-	-	-	(871,162)
Ending Surplus / (Deficit)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	-	-	-	-	-	-	-	-	(1,908,049)
<b>Insurers</b>													
Prior Period Surplus / (Deficit)	4,951,484	5,208,991	5,424,532	5,395,441	-	-	-	-	-	-	-	-	4,951,484
Assessment	2,716,349	2,716,349	2,716,349	2,716,349	-	-	-	-	-	-	-	-	10,865,396
Less Cost	2,458,842	2,500,808	2,745,440	3,136,229	-	-	-	-	-	-	-	-	10,841,319
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	257,507	215,541	(29,091)	(419,880)	-	-	-	-	-	-	-	-	24,077
Ending Surplus / (Deficit)	5,208,991	5,424,532	5,395,441	4,975,561	-	-	-	-	-	-	-	-	4,975,561
<b>Unfunded Deductible and Coinsurance Subsidy</b>													
Prior Period Surplus / (Deficit)	(622,532)	(694,755)	(785,976)	(806,790)	-	-	-	-	-	-	-	-	(622,532)
Monthly Change	(72,223)	(91,221)	(20,814)	(66,653)	-	-	-	-	-	-	-	-	(250,911)
Ending Surplus / (Deficit)	(694,755)	(785,976)	(806,790)	(873,443)	-	-	-	-	-	-	-	-	(873,443)
<b>Total HIRSP Retained Earnings</b>													
	14,498,088	15,711,455	15,768,105	14,470,085	-	-	-	-	-	-	-	-	14,470,085

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



Wisconsin Health Insurance Risk Sharing Plan  
April 30, 2005  
Calendar Year 2005

**Unaudited Balance Sheet**

<b>Assets</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>
Cash and Cash Equivalents	43,348,568	47,057,865	53,789,891	57,009,607	-	-	-	-	-	-	-	-
Other Receivables <sup>(2)</sup>	96,643	125,560	94,016	1,742,701	-	-	-	-	-	-	-	-
Drug Rebates Receivable	1,246,751	1,051,895	1,282,340	1,496,835	-	-	-	-	-	-	-	-
Assessments Receivable	3,357,262	94,485	217,131	97,932	-	-	-	-	-	-	-	-
Prepaid Items	52,878	42,291	17,188	1,280	-	-	-	-	-	-	-	-
<b>Total Assets</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,566</b>	<b>60,348,355</b>	-	-	-	-	-	-	-	-
<b>Liabilities and Fund Equity</b>												
Liabilities:												
Unpaid Medical Loss Liabilities	17,498,548	16,751,485	18,285,381	21,908,176	-	-	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,456,132	2,572,946	965,110	2,584,048	-	-	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	-	-	-	-	-	-	-	-
Unearned Premiums	12,599,991	7,023,489	16,764,621	14,630,761	-	-	-	-	-	-	-	-
Unearned Assessments	2,260	5,010,790	2,537,883	5,432,699	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	387,083	641,931	419,466	662,586	-	-	-	-	-	-	-	-
<b>Total Liabilities</b>	<b>33,604,014</b>	<b>32,660,641</b>	<b>39,632,461</b>	<b>45,878,270</b>	-	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	11,224,539	12,477,327	12,957,102	12,276,016	-	-	-	-	-	-	-	-
Providers	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	-	-	-	-	-	-	-	-
Insurers	5,208,991	5,424,532	5,395,441	4,975,561	-	-	-	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(694,755)	(785,976)	(806,790)	(873,443)	-	-	-	-	-	-	-	-
<b>Total Retained Earnings</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	-	-	-	-	-	-	-	-
<b>Total Liabilities and Fund Equity</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,566</b>	<b>60,348,355</b>	-	-	-	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**

**EARNED PREMIUM**

**FISCAL YEAR 2005**

<b>EARNED PREMIUM</b>	
<b>MONTH</b>	<b>FY 05</b>
JUL	7,539,898
AUG	7,721,780
SEP	7,841,704
OCT	7,743,250
NOV	7,636,437
DEC	7,784,896
JAN	7,885,086
FEB	7,704,983
MAR	7,897,023
APR	7,690,802
MAY	
JUN	
<b>TOTAL</b>	<b>\$ 77,445,859</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan**  
**January 2005 Assessment Status**

Total			1st Installment Due 03/01/2005		2nd Installment Due 05/01/2005	
Assessment Amount: \$16,481,262.21			Assessment Amount: \$8,240,631.17		Assessment Amount:	
\$8,240,631.04						
Period Ending	Payments Received	A/R Balance	Payments Received	A/R Balance	Payments Received	A/R Balance
2005 01	\$2,711.96	\$16,478,550.25	\$1,355.99	\$8,239,275.18	\$1,355.97	\$8,239,275.07
2005 02	\$10,614,378.03	\$5,864,172.22	\$8,133,345.66	\$105,929.52	\$2,481,032.37	\$5,758,242.70
2005 03	\$120,796.35	\$5,743,375.87	\$65,302.23	\$40,627.29	\$55,494.12	\$5,702,748.58
2005 04	\$5,730,364.43	\$13,011.44	\$40,581.38	\$45.91	\$5,689,783.05	\$12,965.53
<b>Grand Total</b>	<b>\$16,468,250.77</b>	<b>\$13,011.44</b>	<b>\$8,240,585.26</b>	<b>\$45.91</b>	<b>\$8,227,665.51</b>	<b>\$12,965.53</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## *Monthly Applicant Activity For April 2005*

Number of Applications Pending March	734
Number of Applications Received April	585
Number of Applications Rejected April	171
Number of Applications Closed in April	23
Number of Applications Pending April	951
Number of Applications Approved April	174

<b>Detail of Applications Rejected</b>	
Insufficient Premium Submitted	0
Eligible for Group Health Coverage	4
Current Medicaid Coverage	0
Not a Wisconsin Resident	5
Did not Qualify for lost Employer Coverage	16
65 or Older	1
Previous HIRSP < 12 Months Ago	3
Currently covered by other insurance	74
No medical reason	68
Total	171

<b>Detail of Applications Closed</b>	
Applicant Request	23
Proper Eligibility Requested, never received	0
Application Data Requested, never received	0
Total	23

- Previous report included the numbers by plan. This data is no longer available.
- The above numbers are based on actual month end which is the last day of the month.
- The receipts include open inventory transitioned from the prior contractor.

Due to a programming error, the pending application numbers in this report are overstated.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Monthly Applicant Activity

April, 2005

A.	Medicare Eligible	2
B.	HIV +	0
C.	Eligible Individual	85
D.	Letter of Medical Eligibility	87
1.	Letter of Rejection By:	
	American Family	3
	American Medical Security Group	5
	American Republic	1
	Blue Cross & Blue Shield United of Wisconsin	12
	Celtic Life Insurance Company	1
	CompCare Blue	2
	Continental General Insurance Company	1
	Dean Health Plan	1
	Federated Mutual Insurance Company	1
	Fortis Benefits Insurance	7
	Golden Rule Insurance Company	2
	Humana Insurance Company	15
	Mega Life and Health Insurance	7
	Mid-West National Life Insurance Company of Tennessee	3
	Midwest Security Life Insurance	2
	Perkin Life Insurance	1
	Sisco	1
	State Farm Mutual Auto Insurance	1
	Unity HealthCare Insurance	4
	Unity Health Plan	2
	WEA Insurance Corp.	1
	Wisconsin Physicians Service Insurance	11
2.	Notice of Benefit Reduction	3
3.	Notice of Premium increase due to a Health Reason	0
Total		174

- The above numbers are based on actual month end which is the last day of the month.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Restated Monthly Enrollment Through April 2005 Month End

	Total Subsidy				Total Non-Subsidy					Combined Total			
	Plan 1A	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total
May 2004	3,168	794	3,962		5,157	8,281	960	14,398		8,325	8,281	1,754	18,360
June 2004	3,171	798	3,969		5,195	8,361	965	14,521		8,366	8,361	1,763	18,490
July 2004	2,957	742	3,699		5,276	8,319	985	14,580		8,233	8,319	1,727	18,279
August 2004	2,978	748	3,726		5,252	8,428	985	14,665		8,230	8,428	1,733	18,391
September 2004	2,980	753	3,733		5,247	8,499	980	14,726		8,227	8,499	1,733	18,459
October 2004	2,985	765	3,750		5,136	8,477	959	14,572		8,121	8,477	1,724	18,322
November 2004	2,975	769	3,744		5,152	8,510	963	14,625		8,127	8,510	1,732	18,369
December 2004	2,984	765	3,749		5,166	8,585	957	14,708		8,150	8,585	1,722	18,457
January 2005	2,930	748	3,678		4,747	9,129	953	14,829		7,677	9,129	1,701	18,507
February 2005	2,913	744	3,657		4,776	9,203	960	14,939		7,689	9,203	1,704	18,596
March 2005	2,921	740	3,661		4,829	9,288	959	15,076		7,750	9,288	1,699	18,737
April 2005	2,922	742	3,664		4,833	9,319	959	15,111		7,755	9,319	1,701	18,775

## Detail of Total Subsidy Policies in Force as of April Month End

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
May 2004	14,398	532	584	746	1,526	574	18,360
June 2004	14,521	533	583	745	1,534	574	18,490
July 2004	14,580	547	540	671	1,361	580	18,279
August 2004	14,665	544	548	671	1,389	574	18,391
September 2004	14,726	548	549	673	1,390	573	18,459
October 2004	14,572	550	537	683	1,413	567	18,322
November 2004	14,625	550	532	685	1,418	559	18,369
December 2004	14,708	550	533	690	1,420	556	18,457
January 2005	14,829	526	517	683	1,436	516	18,507
February 2005	14,939	515	513	681	1,438	510	18,596
March 2005	15,076	514	510	686	1,446	505	18,737
April 2005	15,111	514	508	690	1,451	501	18,775

Level 0 = Income > \$25,000

Level 1 = Income \$17,000-\$19,999

Level 2 = Income \$14,000-\$16,999

Level 3 = Income \$10,000-\$13,999

Level 4 = Income < or equal to \$9,999

Level 5 = Income \$20,000-\$24,999

**Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

## WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

### Total Policies in Force by Plan, Gender and Age Group as of April 2005 Month End

#### Male

Plan	Gender	Age Group	Number of Policyholders
1A	Male	0-24	428
1A	Male	25-29	221
1A	Male	30-34	180
1A	Male	35-39	257
1A	Male	40-44	427
1A	Male	45-49	476
1A	Male	50-54	538
1A	Male	55-59	473
1A	Male	60-64	454
1A	Male	65+	8
		Total	3,462

Plan	Gender	Age Group	Number of Policyholders
1B	Male	0-24	261
1B	Male	25-29	57
1B	Male	30-34	74
1B	Male	35-39	142
1B	Male	40-44	295
1B	Male	45-49	474
1B	Male	50-54	646
1B	Male	55-59	876
1B	Male	60-64	1,336
1B	Male	65+	32
		Total	4,193

Plan	Gender	Age Group	Number of Policyholders
2	Male	0-24	3
2	Male	25-29	12
2	Male	30-34	12
2	Male	35-39	35
2	Male	40-44	71
2	Male	45-49	115
2	Male	50-54	126
2	Male	55-59	106
2	Male	60-64	92
2	Male	65+	138
		Total	710

#### Female

Plan	Gender	Age Group	Number of Policyholders
1A	Female	0-24	396
1A	Female	25-29	211
1A	Female	30-34	207
1A	Female	35-39	227
1A	Female	40-44	333
1A	Female	45-49	472
1A	Female	50-54	575
1A	Female	55-59	791
1A	Female	60-64	1,051
1A	Female	65+	30
		Total	4,293

Plan	Gender	Age Group	Number of Policyholders
1B	Female	0-24	157
1B	Female	25-29	60
1B	Female	30-34	76
1B	Female	35-39	149
1B	Female	40-44	284
1B	Female	45-49	487
1B	Female	50-54	707
1B	Female	55-59	1,175
1B	Female	60-64	1,995
1B	Female	65+	36
		Total	5,126

Plan	Gender	Age Group	Number of Policyholders
2	Female	0-24	3
2	Female	25-29	2
2	Female	30-34	16
2	Female	35-39	26
2	Female	40-44	70
2	Female	45-49	95
2	Female	50-54	136
2	Female	55-59	151
2	Female	60-64	190
2	Female	65+	302
		Total	991

**Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of April 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Male	0-24	25
1A	1	Male	25-29	26
1A	1	Male	30-34	22
1A	1	Male	35-39	30
1A	1	Male	40-44	43
1A	1	Male	45-49	47
1A	1	Male	50-54	39
1A	1	Male	55-59	41
1A	1	Male	60-64	32
1A	1	Male	65+	1
			Total	306

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Male	0-24	143
1A	2	Male	25-29	69
1A	2	Male	30-34	60
1A	2	Male	35-39	75
1A	2	Male	40-44	131
1A	2	Male	45-49	130
1A	2	Male	50-54	156
1A	2	Male	55-59	123
1A	2	Male	60-64	113
1A	2	Male	65+	2
			Total	1,002

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Male	0-24	260
1A	3	Male	25-29	126
1A	3	Male	30-34	98
1A	3	Male	35-39	152
1A	3	Male	40-44	253
1A	3	Male	45-49	299
1A	3	Male	50-54	343
1A	3	Male	55-59	309
1A	3	Male	60-64	309
1A	3	Male	65+	5
			Total	2,154

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Female	0-24	28
1A	1	Female	25-29	31
1A	1	Female	30-34	19
1A	1	Female	35-39	17
1A	1	Female	40-44	23
1A	1	Female	45-49	39
1A	1	Female	50-54	54
1A	1	Female	55-59	78
1A	1	Female	60-64	78
1A	1	Female	65+	2
			Total	369

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Female	0-24	135
1A	2	Female	25-29	55
1A	2	Female	30-34	76
1A	2	Female	35-39	77
1A	2	Female	40-44	112
1A	2	Female	45-49	137
1A	2	Female	50-54	152
1A	2	Female	55-59	215
1A	2	Female	60-64	303
1A	2	Female	65+	9
			Total	1,271

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Female	0-24	233
1A	3	Female	25-29	125
1A	3	Female	30-34	112
1A	3	Female	35-39	133
1A	3	Female	40-44	198
1A	3	Female	45-49	296
1A	3	Female	50-54	369
1A	3	Female	55-59	498
1A	3	Female	60-64	670
1A	3	Female	65+	19
			Total	2,653

**\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of April 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Male	0-24	16
1B	1	Male	25-29	3
1B	1	Male	30-34	8
1B	1	Male	35-39	24
1B	1	Male	40-44	28
1B	1	Male	45-49	31
1B	1	Male	50-54	36
1B	1	Male	55-59	58
1B	1	Male	60-64	75
1B	1	Male	65+	4
Total				283

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Female	0-24	13
1B	1	Female	25-29	7
1B	1	Female	30-34	10
1B	1	Female	35-39	5
1B	1	Female	40-44	17
1B	1	Female	45-49	33
1B	1	Female	50-54	33
1B	1	Female	55-59	72
1B	1	Female	60-64	134
1B	1	Female	65+	1
Total				325

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Male	0-24	78
1B	2	Male	25-29	13
1B	2	Male	30-34	29
1B	2	Male	35-39	40
1B	2	Male	40-44	88
1B	2	Male	45-49	138
1B	2	Male	50-54	206
1B	2	Male	55-59	231
1B	2	Male	60-64	360
1B	2	Male	65+	6
Total				1,189

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Female	0-24	50
1B	2	Female	25-29	15
1B	2	Female	30-34	25
1B	2	Female	35-39	58
1B	2	Female	40-44	81
1B	2	Female	45-49	158
1B	2	Female	50-54	232
1B	2	Female	55-59	365
1B	2	Female	60-64	552
1B	2	Female	65+	12
Total				1,548

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Male	0-24	167
1B	3	Male	25-29	41
1B	3	Male	30-34	37
1B	3	Male	35-39	78
1B	3	Male	40-44	179
1B	3	Male	45-49	305
1B	3	Male	50-54	404
1B	3	Male	55-59	587
1B	3	Male	60-64	901
1B	3	Male	65+	22
Total				2,721

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Female	0-24	94
1B	3	Female	25-29	38
1B	3	Female	30-34	41
1B	3	Female	35-39	86
1B	3	Female	40-44	186
1B	3	Female	45-49	296
1B	3	Female	50-54	442
1B	3	Female	55-59	738
1B	3	Female	60-64	1,309
1B	3	Female	65+	23
Total				3,253

**Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of April 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Male	0-24	0
2	1	Male	25-29	1
2	1	Male	30-34	4
2	1	Male	35-39	10
2	1	Male	40-44	8
2	1	Male	45-49	18
2	1	Male	50-54	20
2	1	Male	55-59	14
2	1	Male	60-64	9
2	1	Male	65+	7
Total				91

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Female	0-24	1
2	1	Female	25-29	0
2	1	Female	30-34	3
2	1	Female	35-39	2
2	1	Female	40-44	9
2	1	Female	45-49	12
2	1	Female	50-54	18
2	1	Female	55-59	16
2	1	Female	60-64	13
2	1	Female	65+	23
Total				97

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Male	0-24	1
2	2	Male	25-29	3
2	2	Male	30-34	4
2	2	Male	35-39	11
2	2	Male	40-44	20
2	2	Male	45-49	37
2	2	Male	50-54	40
2	2	Male	55-59	22
2	2	Male	60-64	33
2	2	Male	65+	43
Total				214

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Female	0-24	0
2	2	Female	25-29	1
2	2	Female	30-34	5
2	2	Female	35-39	10
2	2	Female	40-44	25
2	2	Female	45-49	28
2	2	Female	50-54	37
2	2	Female	55-59	49
2	2	Female	60-64	53
2	2	Female	65+	90
Total				298

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Male	0-24	2
2	3	Male	25-29	8
2	3	Male	30-34	4
2	3	Male	35-39	14
2	3	Male	40-44	43
2	3	Male	45-49	60
2	3	Male	50-54	66
2	3	Male	55-59	70
2	3	Male	60-64	50
2	3	Male	65+	88
Total				405

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Female	0-24	2
2	3	Female	25-29	1
2	3	Female	30-34	8
2	3	Female	35-39	14
2	3	Female	40-44	36
2	3	Female	45-49	55
2	3	Female	50-54	81
2	3	Female	55-59	86
2	3	Female	60-64	124
2	3	Female	65+	189
Total				596

**Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

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## WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

### Total Subsidy/Non-Subsidy Restated for April 2005 Month End

Plan			Number of Policyholders
1A	Non-subsidized		4,833
1A	Subsidized		2,922
1B	Non-subsidized		9,319
2	Non-subsidized		959
2	Subsidized		742
Total			18,775

### Total Subsidy by Level

Subsidy Level	Number of Policyholders
Level 0	15,111
Level 1	514
Level 2	508
Level 3	690
Level 4	1,451
Level 5	501
Total	18,775

	Number of Policyholders
Plan 1A, Zone 1, Non-Subsidized	357
Plan 1A, Zone 1, Subsidized	318
Plan 1A, Zone 2, Non-Subsidized	1,470
Plan 1A, Zone 2, Subsidized	803
Plan 1A, Zone 3, Non-Subsidized	3,006
Plan 1A, Zone 3, Subsidized	1,801
Plan 1B, Zone 1, Non-Subsidized	608
Plan 1B, Zone 2, Non-Subsidized	2,737
Plan 1B, Zone 3, Non-Subsidized	5,974
Plan 2, Zone 1, Non-Subsidized	86
Plan 2, Zone 1, Subsidized	102
Plan 2, Zone 2, Non-Subsidized	304
Plan 2, Zone 2, Subsidized	208
Plan 2, Zone 3, Non-Subsidized	569
Plan 2, Zone 3, Subsidized	432
Total	18,775

**Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

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# Wisconsin Health Insurance Risk Sharing Plan

## Monthly Service Report

For: April, 2005

### Customer Service/Policyholder Services

Week Ending	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait (ASA)*	Longest Wait	Average Talk	Service Level**
4/8/2005	4,582	4,505	77	1.70%	00:00:32	00:09:35	00:03:43	91.80%
4/15/2005	4,591	4,521	70	1.50%	00:00:31	00:05:16	00:03:47	94.30%
4/22/2005	4,085	4,039	46	1.10%	00:00:28	00:06:19	00:03:36	93.90%
4/29/2005	4,206	4,130	76	1.80%	00:00:29	00:05:25	00:03:27	93.80%

### Historical Stats\*\*\*

02-2004	10,435	9,338	1,097	10.5 %	00:04:26	00:14:17	00:03:13	
03-2004	11,213	9,694	1,519	13.5 %	00:05:02	00:13:04	00:03:06	
04-2004	13,716	12,529	1,187	8.7 %	00:03:34	00:11:04	00:02:52	
01-2005	10,390	9,357	1,015	9.6 %	00:04:09	00:11:24	00:03:35	
02-2005	10,618	9,625	933	8.8 %	00:03:40	00:12:35	00:03:29	
03-2005	13,363	11,782	1,561	11.5 %	00:04:34	00:18:00	00:03:30	
04-2005	18,245	17,962	283	1.6 %	00:00:30	00:09:35	00:03:38	93.00%

### Medical Affairs Telephone

4/8/2005	174	169	5	2.90%	00:00:27	00:02:37	00:03:07	95.00%
4/15/2005	180	76	44	3.30%	00:00:31	00:03:02	00:03:07	91.70%
4/22/2005	175	173	2	1.10%	00:00:15	00:03:36	00:03:06	98.30%
4/29/2005	193	191	2	0.10%	00:00:18	00:03:40	00:04:38	95.90%

### PBM Telephone Results

4/8/2005	1,060	1,059	1	0.10%	00:00:03	00:03:08	00:03:25	95.80%
4/15/2005	863	859	4	0.10%	00:00:04	00:02:24	00:03:21	95.00%
4/22/2005	720	718	2	0.10%	00:00:01	00:02:24	00:03:56	97.50%
4/29/2005	783	781	2	0.10%	00:00:02	00:00:31	00:03:56	97.40%

All Time Formats are hh:mm:ss Historical Stats prior to April 1, 2005 have all been converted to the new format.

\* ASA = Average Speed of Answer

\*\* Service Level = Calls handled within 120 seconds divided by the number of calls offered.

\*\*\*Monthly totals are based on actual month end which is the last day of the month.

### Most Commonly Asked Questions to Customer Service/ Policyholder Services

- What is the status of my claim?
- What is the status of my application?
- Why was my claim denied?

### Open Written Correspondence

Department	Beginning Inventory	Received	Complete	1 to 2 Days	3 to 5 Days	6 +Days	Ending Inventory
CUSTOMER SERVICE	0	237	210	3	20	4	27
MEDICAL AFFAIRS	0	1	1	0	0	0	0
POLICYHOLDER SERVICES	3	589	117	0	66	409	475

### \*First Call Resolution

Number of Calls Handled	First Call Resolved	Percent of Calls
12,317	11,208	91.00%

\*First Call Resolution is monitored in Customer Service.

### Telephone and Written

Number of Days	Number of Inquires	Number Closed	Percentage
5	2389	2257	94.47%
2	2332	2185	93.70%

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**CLAIMS THAT HAVE FINALIZED TO PAYMENT OR DENIAL AS OF APRIL 2005 MONTH END(4/27/2005)**

	Apr 2004*	May 2004*	Jun 2004*	Jul 2004*	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**
	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
<b>Plan 1A</b>													
Pharmacy													23,720
Inpatient Hospital													71
Inpatient Hospital Crossovers													2
Outpatient Hospital													2,240
Outpatient Hospital Crossovers													21
Professional													8,566
Professional Crossovers													31
Nursing Home													13
Nursing Home Crossovers													0
Miscellaneous													1,070
Miscellaneous Crossovers													4
Total Plan 1A													35,738
<b>Plan 1B</b>													
Pharmacy													20,059
Inpatient Hospital													66
Inpatient Hospital Crossovers													1
Outpatient Hospital													1,698
Outpatient Hospital Crossovers													11
Professional													6,617
Professional Crossovers													63
Nursing Home													1
Nursing Home Crossovers													0
Miscellaneous													717
Miscellaneous Crossovers													1
Total Plan 1B													29,234
<b>Plan 2</b>													
Pharmacy													12,083
Inpatient Hospital													4
Inpatient Hospital Crossovers													52
Outpatient Hospital													155
Outpatient Hospital Crossovers													771
Professional													311
Professional Crossovers													3,133
Nursing Home													6
Nursing Home Crossovers													5
Miscellaneous													252
Miscellaneous Crossovers													622
Total Plan 2													17,394
<b>Total</b>													
Pharmacy	59,494	62,285	59,962	60,942	60,172	61,367	92,799	63,286	63,621	62,372	61,359	63,736	55,862
Inpatient Hospital	542	439	377	474	383	268	612	439	540	422	462	421	141
Inpatient Hospital Crossovers	104	87	65	99	71	42	99	75	71	73	96	77	55
Outpatient Hospital	4,798	4,121	4,083	4,953	3,962	3,571	5,386	4,145	5,705	4,027	4,448	3,164	4,093
Outpatient Hospital Crossovers	1,291	1,129	1,325	1,216	935	770	1,199	975	1,598	1,015	1,211	882	803
Professional	29,708	26,378	26,837	26,033	20,637	22,116	30,612	24,387	32,229	24,762	26,193	18,349	15,494
Professional Crossovers	5,534	4,072	4,465	5,037	3,434	3,675	5,294	3,918	6,286	4,251	4,592	2,977	3,227
Nursing Home	43	48	35	18	11	16	34	18	14	31	26	29	20
Nursing Home Crossovers	12	13	7	19	14	11	36	11	11	6	4	2	5
Miscellaneous	2,559	2,216	1,835	2,278	1,823	1,286	2,120	1,921	2,405	1,817	1,842	1,948	2,039
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	0	0	0	0	627
Total	104,085	100,788	98,991	101,069	91,442	93,122	138,191	99,175	112,480	98,776	100,233	91,585	82,366

\* The reporting of claims numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2

\*\*\*Starting this month the total number of claims in this report does not balance to the total number of claims reported in the Paid and Denied(non-pharmacy)report because a claim that has both a paid line and a denied line is counted only once in this report. It is counted once as a paid claim and once as a denied claim in the Paid and Denied(non-pharmacy) Report.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**

**AVERAGE CLAIMS PROCESSING DAYS AS OF APRIL 2005 MONTH END(4/27/2005)**

	Apr 2004*	May 2004*	Jun 2004*	Jul 2004*	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**
	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days
<b>Plan 1A</b>													
Inpatient Hospital													30.04
Inpatient Hospital Crossovers													37.00
Outpatient Hospital													11.96
Outpatient Hospital Crossovers													25.00
Professional													20.39
Professional Crossovers													23.86
Nursing Home													13.88
Nursing Home Crossovers													0.00
Miscellaneous													23.20
Miscellaneous Crossovers													36.75
Average for the Month for Plan 1A													19.09
<b>Plan 1B</b>													
Inpatient Hospital													27.56
Inpatient Hospital Crossovers													35.00
Outpatient Hospital													12.69
Outpatient Hospital Crossovers													27.63
Professional													20.50
Professional Crossovers													22.80
Nursing Home													16.00
Nursing Home Crossovers													0.00
Miscellaneous													23.74
Miscellaneous Crossovers													11.00
Average for the Month for Plan 1B													19.33
<b>Plan 2</b>													
Inpatient Hospital													24.00
Inpatient Hospital Crossovers													29.38
Outpatient Hospital													19.54
Outpatient Hospital Crossovers													25.07
Professional													25.29
Professional Crossovers													23.33
Nursing Home													21.33
Nursing Home Crossovers													22.60
Miscellaneous													19.19
Miscellaneous Crossovers													26.35
Average for the Month for Plan 2													23.91
<b>Total</b>													
Inpatient Hospital	18.00	17.00	16.00	15.00	15.00	17.00	21.00	18.00	17.00	15.00	17.00	15.00	28.58
Inpatient Hospital Crossovers	12.00	14.00	11.00	9.00	11.00	15.00	15.00	16.00	13.00	12.00	14.00	10.00	29.75
Outpatient Hospital	11.00	13.00	11.00	10.00	11.00	14.00	14.00	13.00	13.00	11.00	12.00	12.00	12.45
Outpatient Hospital Crossovers	16.00	19.00	15.00	13.00	15.00	19.00	21.00	22.00	25.00	19.00	19.00	16.00	25.10
Professional	13.00	15.00	11.00	12.00	14.00	16.00	15.00	15.00	14.00	13.00	11.00	11.00	20.53
Professional Crossovers	12.00	11.00	10.00	11.00	14.00	15.00	17.00	17.00	17.00	13.00	12.00	13.00	23.32
Nursing Home	12.00	11.00	16.00	10.00	17.00	17.00	15.00	14.00	14.00	14.00	15.00	15.00	15.76
Nursing Home Crossovers	10.00	6.00	11.00	9.00	9.00	16.00	17.00	11.00	12.00	18.00	15.00	9.00	22.60
Miscellaneous	14.00	15.00	13.00	14.00	14.00	19.00	21.00	24.00	24.00	17.00	18.00	17.00	22.97
Miscellaneous Crossovers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26.39
Average for the Month	14.00	***16.00	12.00	12.00	13.00	16.00	16.00	***16.00	16.00	13.00	14.00	12.00	20.12

\* The reporting of average processing days before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Average processing days on claims adjustments used to be reported by the previous administrator. Average processing days will not be reported on claim adjustments beginning with April 2005. Therefore, they have not been reported in this report for any month.

\*\*\* Higher than normal claim average resulting from clean up of aged medical review claims

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
HIRSP CLAIMS INVENTORY AS OF APRIL 2005 MONTH END(4/27/2005)**

Pended Claims Data	Apr 2004* # of Claims	May 2004* # of Claims	Jun 2004* # of Claims	Jul 2004* # of Claims	Aug 2004* # of Claims	Sep 2004* # of Claims	Oct 2004* # of Claims	Nov 2004* # of Claims	Dec 2004* # of Claims	Jan 2005* # of Claims	Feb 2005* # of Claims	Mar 2005** # of Claims	Apr 2005*** # of Claims
<b>Prior to Entry</b>													
Total													1,056
<b>Pre-System Suspend</b>													
Plan 1A													3,954
Plan 1B													2,946
Plan 2													2,318
Total												20,482	9,218
Total Over 30 Days Old													1,696
<b>System Pended</b>													
<b>Plan 1A</b>													
Inpatient Hospital													232
Inpatient Hospital Crossovers													2
Outpatient Hospital													759
Outpatient Hospital Crossovers													20
Professional													4,347
Professional Crossovers													46
Nursing Home													29
Nursing Home Crossovers													0
Miscellaneous													1,146
Miscellaneous Crossovers													3
Total Plan 1A													6,584
Total Over 30 Days Old													1,856
<b>Plan 1B</b>													
Inpatient Hospital													143
Inpatient Hospital Crossovers													2
Outpatient Hospital													495
Outpatient Hospital Crossovers													14
Professional													3,218
Professional Crossovers													23
Nursing Home													8
Nursing Home Crossovers													0
Miscellaneous													667
Miscellaneous Crossovers													7
Total Plan 1B													4,577
Total Over 30 Days Old													1,360
<b>Plan 2</b>													
Inpatient Hospital													3
Inpatient Hospital Crossovers													40
Outpatient Hospital													60
Outpatient Hospital Crossovers													329
Professional													147
Professional Crossovers													1,741
Nursing Home													2
Nursing Home Crossovers													18
Miscellaneous													109
Miscellaneous Crossovers													557
Total Plan 2													3,006
Total Over 30 Days Old													694
<b>Total</b>													
Inpatient Hospital	143	126	112	99	129	230	228	142	127	169	170	0	378
Inpatient Hospital Crossovers	11	9	14	13	8	19	17	7	15	22	16	0	44
Outpatient Hospital	894	918	609	818	983	1,040	1,002	963	699	969	650	0	1,314
Outpatient Hospital Crossovers	416	477	214	256	422	447	581	540	247	403	275	0	363
Professional	6,842	6,824	3,104	5,690	7,073	7,344	8,292	6,457	5,872	5,322	3,600	0	7,712
Professional Crossovers	598	713	381	836	1,587	1,483	1,643	1,564	580	1,190	668	0	1,810
Nursing Home	5	12	1	6	7	9	8	4	15	13	10	0	39
Nursing Home Crossovers	1	1	2	2	1	6	2	2	3	1	0	0	18
Miscellaneous	672	321	449	379	617	863	1,137	865	728	836	845	0	1,922
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	0	0	0	0	567
Total	9,582	9,401	4,886	8,099	10,827	11,441	12,910	10,544	8,286	8,925	6,234	0	14,167
Total Over 30 Days Old	2,378	1,427	1,435	1,198	989	1,437	1,813	1,897	651	868	467	0	5,606
<b>Grand Total</b>	<b>9,582</b>	<b>9,401</b>	<b>4,886</b>	<b>8,099</b>	<b>10,827</b>	<b>11,441</b>	<b>12,910</b>	<b>10,544</b>	<b>8,286</b>	<b>8,925</b>	<b>6,234</b>	<b>20,482</b>	<b>24,441</b>

\* The reporting of inventory numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Prior administrator claim inventory is zero due to transition of plan administration to WPS. 1,807 claims were pending and transferred to WPS on March 31st. WPS received 20,482 HIRSP claims from providers and the prior administrator during the period 3/14/2005 - 3/31/2005.

\*\*\* Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## MEDICAL CLAIMS DENIED REPORT\*

As of April 2005 Month End(4/27/2005)

Processed Month	Plan 1A		Plan 1B		Plan 2		All Plans			Denial Rate
	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total	
April 2004	16,145	6,557	9,583	4,109	5,364	2,833	31,092	13,499	44,591	30.3%
May 2004	13,862	5,916	8,378	3,787	4,326	2,234	26,566	11,937	38,503	31.0%
June 2004	14,320	5,412	8,906	3,554	4,796	2,041	28,022	11,007	39,029	28.2%
July 2004	14,539	5,511	9,098	3,723	4,916	2,340	28,553	11,574	40,127	28.8%
August 2004	11,258	4,409	7,199	3,018	3,743	1,643	22,200	9,070	31,270	29.0%
September 2004	11,398	4,318	7,676	3,016	3,924	1,423	22,998	8,757	31,755	27.6%
October 2004	16,461	5,752	11,535	3,880	5,751	2,013	33,747	11,645	45,392	25.7%
November 2004	12,686	4,232	9,584	3,458	4,389	1,540	26,659	9,230	35,889	25.7%
December 2004	16,889	5,819	12,715	4,376	6,458	2,602	36,062	12,797	48,859	26.2%
January 2005	12,980	4,239	9,710	3,192	4,542	1,741	27,232	9,172	36,404	25.2%
February 2005	12,985	5,197	9,862	3,935	4,884	2,011	27,731	11,143	38,874	28.7%
March 2005	9,529	3,403	7,389	2,752	3,297	1,479	20,215	7,634	27,849	27.4%
April 2005	10,223	2,143	7,789	1,678	4,185	1,109	22,197	4,930	27,127	18.2%

\* Claims denied by the PBM are not included. See page 30 for claims denied by the PBM.

A claim may have some paid lines and some denied lines. Therefore, a claim that has both paid and rejected lines has been counted as a paid claim and as a denied claim. This results in more total claims being reported in this report than in the report titled Claims That Have Finalized to Payment or Denial Report.

### END OF MONTH APRIL 2005 DENIAL REASON DETAIL

Denial Reason	Volume	Top 10 Reasons for Denial
18/DU	1,966	DUPLICATE CLAIM/SERVICE
49	679	NONCOVERED SERVICES BECAUSE THIS IS A ROUTINE EXAM OR SCREENING PROCEDURE DONE IN CONJUNCTION WITH A ROUTINE EXAM
23	562	CLAIM DENIED/REDUCED BECAUSE CHARGES HAVE BEEN PAID BY ANOTHER PAYER AS PART OF COORDINATION OF BENEFITS
27/28	453	EXPENSE(S) INCURRED OUTSIDE COVERAGE PERIOD ARE NOT COVERED
EM	375	WE NEED THE MEDICARE EXPLANATION OF BENEFITS TO PROCESS THIS CHARGE
51	323	THIS IS A PREEXISTING CONDITION. MEDICAL RECORDS OBTAINED FROM YOUR PROVIDER HAVE IDENTIFIED A PRE-EXISTING CONDITION
IS	128	THIS PROCEDURE IS INCIDENTAL TO AND CONSIDERED PART OF THE PRIMARY PROCEDURE
V1	91	PRIMARY SERVICE CODE INCLUDES THE OTHER SERVICES BILLED, NO PAYMENTS HAVE BEEN ALLOWED FOR THE OTHER SERVICES
HF	89	AS A SERVICE TO OUR CUSTOMER, THIS CLAIM HAS BEEN FORWARDED TO THE PHARMACY BENEFITS MANAGER(PBM)
V4	79	ONE SERVICE CODE OF THIS TYPE IS ACCEPTED ON A SINGLE DAY, THEREFORE THE DUPLICATE OR LESSER CODE HAS BEEN ELIMINATED

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
PHARMACY CLAIMS DENIED REPORT  
As of April 2005 Month End(4/30/2005)\***

<b>Processed Month</b>	<b>Denied</b>
April 2004	9,383
May 2004	7,614
June 2004	8,148
July 2004	8,570
August 2004	8,297
September 2004	9,048
October 2004	13,104
November 2004	8,873
December 2004	8,555
January 2005	8,664
February 2005	7,627
March 2005	8,304
April 2005	25,472

**END OF MONTH APRIL 2005 DENIAL REASON DETAIL**

<b>Top 10 Reasons for Denial</b>	<b>Volume</b>
Plan Limitation Exceeded	8,231
DUR Rejected Error-Interaction Drugs	7,267
NDC Not Covered	5,568
Missing/Invalid Dispense as Written Code	1,707
Missing/Invalid Birth Date	717
Missing/Invalid Sex Code	651
Refill Too Soon	590
Filled After Coverage Terminated	112
Duplicate Paid/Captured Claim	96
Prior Authorization Required	83

**\* Each prescription processed and denied is counted as one claim**

**Note the different end of month date from previous reports in this pack  
This is due to these figures being taken from a production PBM report  
rather than from the current HIRSP plan administrator's reporting files.**

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Claims Accuracy Performance \* April 2005

Month	Total Number of Claims	Total of Claims Payments	Total Claim Payments Reviewed	Total Correct Payment	Accuracy Rate
May-2004	38,503	\$6,050,073.00	\$64,896.00	\$64,833.00	99.90%
June-2004	39,029	\$5,640,805.00	\$49,747.00	\$49,826.00	99.84%
July-2004	40,127	\$7,059,137.00	\$80,036.00	\$80,036.00	100.00%
August-2004	31,270	\$5,264,531.00	\$49,875.00	\$49,875.00	100.00%
September-2004	31,755	\$4,024,798.00	\$86,524.00	\$86,524.00	100.00%
October-2004	45,392	\$8,169,270.00	\$63,287.00	\$63,287.00	100.00%
November-2004	35,889	\$6,631,268.00	\$79,182.00	\$79,156.00	99.97%
December-2004	48,859	\$9,595,500.00	\$52,645.00	\$52,645.00	100.00%
January-2005	36,404	\$6,551,366.00	\$95,201.00	\$95,201.00	100.00%
February-2005	38,874	\$6,256,306.00	\$80,016.00	\$80,016.00	100.00%
March-2005	27,849	\$5,125,139.00	\$58,769.00	\$58,769.00	100.00%
April-2005	28,646	\$4,001,294.29	\$67,258.90	\$67,605.30	99.49%

\* This report is prepared on a processed date basis using all dates in a calendar month versus other reports that are prepared on a schedule that uses the standard end of month processing dates. Therefore, claims data in this report will not agree with claims data on other reports.

Beginning with the report for the month of June 2005, and at the end of each quarter after that the report will be modified to incorporate the Pharmacy Benefit Managements quarterly audit results. We will add an additional line after each quarter of medical claims to summarize the monthly numbers currently in the report.

# Wisconsin Health Insurance Risk Sharing Plan

## Appeals and Grievance

April, 2005

### Claim Appeals

Total Claim Appeals Received	33
Billing/Claim Processing	9
Drug & Drug Formulary	10
Enrollment/Eligibility Requirements	5
Not Covered Benefit	2
Not Medically Necessary	2
Plan Administration	3
Prior Authorization	2

Total Claims/Reinstatements	47
Claim Appeals Average Number of Days	10.06

### Grievances

Grievance Committee	
Billing/Claim Processing	1
Enrollment/Eligibility Requirements	6
Not Covered Benefit	1
Plan Administration	1

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.